Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application or Docket Number.

Substitute for Form PTO-875									10073/1/		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	NUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	
	SIC FEE CFR 1.16(a))					1					FEI
TO	TAL CLAIMS CFR 1.16(c))		minus :	20 = :		1	V 6	\$	OR		+==
IN	DEPENDENT CLA	IMS	minus 3 =			1	× \$=		OR	× \$=	
<u> </u>	CFR 1.16(b))		d v			1	X \$=		OR	× \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
	Ć	CLAIMS AS AM	MENDE	D – PART II							
		(Column 1)	·	(Column 2)	(Column 3)		SMALL E	ENTITY	OR		R THAN
AMENDMENT A		CLAIMS	Ţ	HIGHEST	T	1	On the t			SMALL	ENTITY
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION/ FEE
	Total (37 CFR 1.16(c))	33	Minus	22	= //		x \$ =		OR	× \$ 18 =	19800
	Independent (37 CFR 1.16(b))	4	Minus	3	= /		x \$ =		OR	x \$ 88 =	88
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))										00
	<u> </u>			<u> </u>		L	+ \$ =		OR	+ \$ = TOTAL	28%
							ADD'L FEE		OR	ADD'L FEE	000
	<u> </u>	(Column 1)	1	(Column 2)	(Column 3)	г				·	<i>PU</i> ·
MENT B		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	. PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA
AMENDME	Total (37 CFR 1.16(c))	•	Minus		=	f	V				FEE
	Independent (37 CFR 1.16(b))	•	Minus	•••	=	-	× \$ =		OR	=	
			l	<u> </u>	L	ŀ	× \$=		OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ =		OR	+ \$ =	
				<u>.</u> -			ADD'L FEE		OR	ADD'L FEE	<u> </u>
		(Column 1)		(Column 2)	(Column 3)		<u> </u>				
N N		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE
) ME	Total (37 CFR 1.16(c))	•	Minus	••	=		x \$ =		OR	x \$ =	
AMENOMEN	Independent (37 CFR 1.16(b))	•	Minus		=		x \$ =			x \$ =	
ŽΙ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. (27 CED 4 (6/4))							OR			
┸							+ \$ = TOTAL		OR	+ \$ = TOTAL	
•	If the entry in co	lumn 1 is less thar	n the entry	rin column 2. weite	a "U" in cohima 3		ADD'L FEE		OR	ADD'L FEE	

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.